٠									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOR									: 18/687,964.						
Effective October 1, 2003															
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)									EN	TITY	OR	OTHER	THAN ENTITY		
T	OTAL CLAIMS	3	- 1;					RATE	T	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUM	NUMBER EXTRA		BASIC FEE 385.00		385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			28 minus 20=		. 8			X\$ 9= 72		7200	OR	X\$18=			
ini	DEPENDENT C	LAIMS		inus 3 =	•				X43=		OR	X86=			
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT								1	+290=	<u> </u>		
* If the difference in column 1 is less than zero, enter "0" in column 2								+145:	4	OA.	OR OR	TOTAL	 		
CLAIMS AS AMENDED - PART II									L	PU	Jon		TVAN		
		(Column 1)	(WIENDE)	(Column 2) (Column 3)					SMALL ENTITY				OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING		HIGH	ST	PRESENT	1			ADDI-			ADDI-		
		AFTER AMENDMENT		PREVIO	USLY	EXTRA	RATI		TIONAL			RATE	TIONAL FEE		
	Total ·	· 14.	Minus	-2	7	•	'	X\$ 9=	T		OR	X\$18=			
	Independent	• •/	Minus	***				X43=	1		OR	X86=			
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							···iáR	1		:	-200-			
+145= OR +290= TOTAL OR TOTAL												:			
ADDIT. FEEOH ADDIT. FEE												OOIT. FEE	<u> </u>		
(Column 1) (Column 2) (Column 3)									_			····			
18		REMAINING AFTER		NUMB PREVIO	ER	PRESENT EXTRA		RATE		ADDI- TIONAL	- 1	RATE	ADDI- TIONAL		
AMENDMENT		AMENDMENT		PAID		EXITY	I		Ļ	FEE	ļ		FEE		
	Total	•	Minus	**	<u> </u>	•		X\$ 9=	ŀ		OR	X\$18=			
AME	Independent	•	Minus	***	·	-		X43=			OR	X86=			
PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												+290=			
								+145=	╀		OR L	TOTAL			
									ĒL	لـــــــــــــــــــــــــــــــــــــ	OR ,	DOTT. FEE			
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST															
AMENDMENT C	`	CLAIMS REMAINING	٠ •	MUMB	ER :	PRESENT	I	DATE		ONAL		CATE	ADDI- TIONAL		
	•	AFTER ' AMENDMENT		PREVIOU PAID F		ÉXLLA	L	RATE		FEE	L	RATE	FEE		
	Total	•	Minus	4		•	1	X\$ 9-	ŀ		OR	X\$18=	,		
	indep ndent	•	Minus	444		=		X43=	t			X86=			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								╂		OR				
	dia salai la salai	4 la lan- 15			, 		L	·+145=	L		OR	+290=			
₩ #	the Tighest Nur	nn 1 is less than the nber Previously Pai	d For IN THIS	SPACE IS	ess thar	20, enter "20."	A	TOTAL DDIT. FEE			OR A	TOTAL DDIT. FEE			
7	i ine "Flighest Num be "Flighest Num	nber Previously Paid ber Previously Paid	o For IN THII For (Total or	s SPACE is i Independen	iess thai i) is the	n 3, enter "3." highest number (priate box			· .		